Massive Miscarriage Rates Among Vaccinated Pregnant Women Found Buried In The Pfizer Documents

The pharmaceutical industry has committed crimes for decades, paying $30 billion in civil and criminal fines since 2000. The Pfizer documents reveal their latest criminal assault on our health.

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Aug 20

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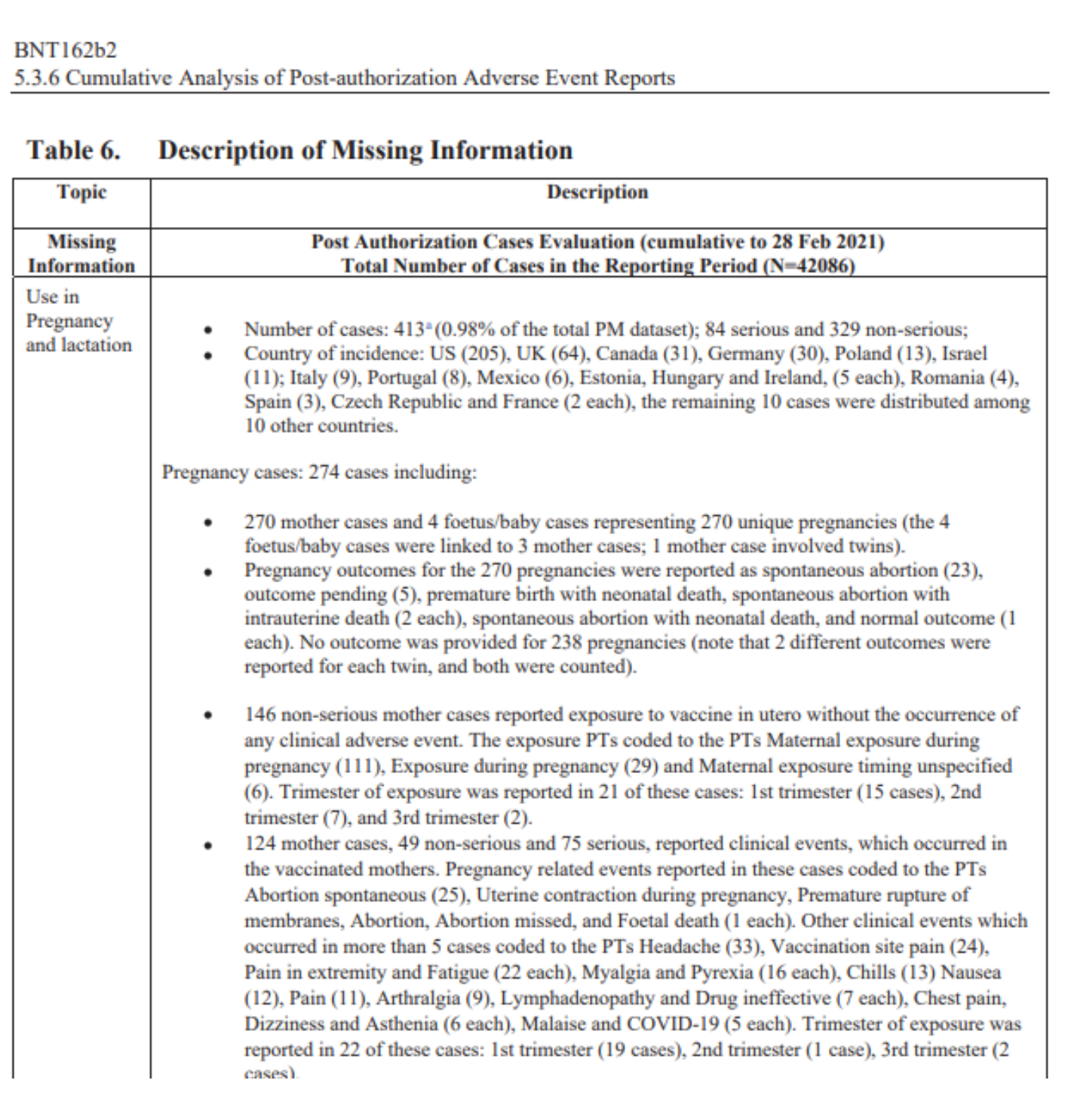
Let's start with the fact the PFDA (the P is not a typo) asked a federal court for 75 years to make public the many thousands of pages of data submitted to them by Pfizer to support the EUA they (the **PFDA**) issued.

One interpretation of this action is that they wanted the data to stay hidden for a long time to hide fraud and/or criminality (same thing). The other is that they only had enough staff to complete this task within 75 years. Let's ignore the 2nd one as absurd on its face (especially since they seem to be pouring out documents monthly after the judge ordered them to). Where there is a will there is a way apparently.

Now why would they want to keep the data hidden? What lies within the realm of possibilities is that at the time they went to court, they knew the EUA and the resulting massive national and global vaccine campaign were pre-determined and independent of whatever "science" emerged to support or not support the campaign. Unfortunately for them, the "science" was not supportive. At all. So they tried to suppress the serious troubling toxicity and lack of efficacy data contained within those documents.

Well the court ordered them to make public thousands of pages of documents each month. My hypothesis above seems to be validated by the uncovering of what is not just troubling, but absolutely terrifying data on the lack of safety in pregnancy. While Dr Naomi Wolf and the WarRoom/DailyClout Research Volunteers recently corrected a report that overcounted miscarriages in one section of the Pfizer documents, they are right to have early and often called attention to signals about this issue overall. Indeed in May 2022, they broke the story of another section of the Pfizer documents, in which the mortality rate of fetuses and babies of women vaccinated with Pfizer's mRNA injection was about 80 per cent.

Now, let's do a dive on just one page of the many thousands. See below, Section 5.3.6, Page 12 of the document called "Cumulative Analysis of Post-Authorization Adverse Event Reports."



BNT162b2
5.3.6 Cumulative Analysis of Post-authorization Adverse Event Reports

Table 6. Description of Missing Information

Topic	Description
Missing Information	**Post Authorization Cases Evaluation (cumulative to 28 Feb 2021)** **Total Number of Cases in the Reporting Period (N=42086)**
Use in Pregnancy and lactation	• Number of cases: 413ᵃ (0.98% of the total PM dataset); 84 serious and 329 non-serious; • Country of incidence: US (205), UK (64), Canada (31), Germany (30), Poland (13), Israel (11); Italy (9), Portugal (8), Mexico (6), Estonia, Hungary and Ireland, (5 each), Romania (4), Spain (3), Czech Republic and France (2 each), the remaining 10 cases were distributed among 10 other countries. Pregnancy cases: 274 cases including: • 270 mother cases and 4 foetus/baby cases representing 270 unique pregnancies (the 4 foetus/baby cases were linked to 3 mother cases; 1 mother case involved twins). • Pregnancy outcomes for the 270 pregnancies were reported as spontaneous abortion (23), outcome pending (5), premature birth with neonatal death, spontaneous abortion with intrauterine death (2 each), spontaneous abortion with neonatal death, and normal outcome (1 each). No outcome was provided for 238 pregnancies (note that 2 different outcomes were reported for each twin, and both were counted). • 146 non-serious mother cases reported exposure to vaccine in utero without the occurrence of any clinical adverse event. The exposure PTs coded to the PTs Maternal exposure during pregnancy (111), Exposure during pregnancy (29) and Maternal exposure timing unspecified (6). Trimester of exposure was reported in 21 of these cases: 1st trimester (15 cases), 2nd trimester (7), and 3rd trimester (2). • 124 mother cases, 49 non-serious and 75 serious, reported clinical events, which occurred in the vaccinated mothers. Pregnancy related events reported in these cases coded to the PTs Abortion spontaneous (25), Uterine contraction during pregnancy, Premature rupture of membranes, Abortion, Abortion missed, and Foetal death (1 each). Other clinical events which occurred in more than 5 cases coded to the PTs Headache (33), Vaccination site pain (24), Pain in extremity and Fatigue (22 each), Myalgia and Pyrexia (16 each), Chills (13) Nausea (12), Pain (11), Arthralgia (9), Lymphadenopathy and Drug ineffective (7 each), Chest pain, Dizziness and Asthenia (6 each), Malaise and COVID-19 (5 each). Trimester of exposure was reported in 22 of these cases: 1st trimester (19 cases), 2nd trimester (1 case), 3rd trimester (2 cases).

Looking at the first bullet under the header:

Pregnancy cases: 274 cases including:

In this paragraph, at first read, it is just a list of adverse events and numbers, detailed in a way that is confusing at best, and obfuscating at worst. I think it is the latter because, if you do some simple arithmetic trying to parse that paragraph, you end up with this:

> 270 pregnancies were reported in vaccinated women during the first 12 weeks of the vaccine campaign. In 238 of them, "no outcome was provided." So, they only knew the outcome of 32 pregnancies reported. What happened in those 32 pregnancies they followed up on?

My hands are literally trembling as I write this, but here goes. In these 32 pregnancies, there were:

- 23 spontaneous abortions
- 2 spontaneous abortions with intra-uterine death
  - So, 25 of the 32 pregnancies with known outcomes resulted in a miscarriage, a rate of 78%. Note that miscarriage normally occurs in only 12-15% of pregnancies
- 2 premature births with neonatal death
- 1 spontaneous abortion with neonatal death
- 1 normal outcome

Note that this only adds up to 29 known outcomes, but then they note that "two different outcomes were reported for each twin" and then they talk about "fetus/baby cases as separate from mother cases." I have no idea how to interpret this explanation of outcomes, so it may have been one or two less (or more) deaths then.

So, of the 32 pregnancies they knew the outcome of, 87.5% resulted in the death of the fetus or neonate. Burying this data in the way and not alerting the world to what they found, is criminal activity yet again. This is what they do and have always done when one of their novel products begins to cause death. It is just these kinds of actions that hav resulted in the billions of criminal and civil fines they have paid in the last 20 years alone. They have done this with numerous newly launched medications such as Avandia, Bextra, Vioxx, and let's not forget oxycodone. Many hundreds of thousands of deaths have resulted with the burying of adverse event and death data around newly launched products until they are caught, pay massive fines, and then carry on doing the same thing.

Check out this article reviewing their decades of criminality in which this quote appears:

> While the defense industry used to be the biggest defrauder of the federal government under the False Claims Act (FCA), a law enacted in 1863 to prevent defense contractor fraud, the pharmaceutical industry has greatly overtaken the defense industry in recent years. The pharmaceutical industry now tops not only the defense industry, but all other industries in the total amount of fraud payments for actions taken against the federal government under the False Claims Act."

This one is bigger though. And maybe why I keep hearing of a bunch of folks now starting to short their stock as they see this fraud as potentially bankrupting these companies. Maybe, maybe not. They are really good at surviving their frauds and scandals.

Further, in looking at the Pfizer documents more broadly you find so many fragmentations and obfuscations of data in the way they present the data, combined with inexplicable categorizations of deaths as unrelated to the vaccine when they could never have known that (yet should have assumed it until proven otherwise). No wonder it takes an army of volunteers months to dissect and pull out what the actual data indicates.

Now, ignoring and obfuscating the massive toxicity to the fetuses of pregnant women exposed to the vaccine ***also has major implications on fertility***.

And this is where it gets even more horrifying. Birth rates are plummeting in many countries around the world, but the way in which they are plummeting is unprecedented. They are large drops, and they are occurring, almost like clockwork, approximately 9 months after pregnant women around the world started to be vaccinated . This is occurring after women the world over were told it is "safe and effective" in pregnancy despite the fact *the trials did not include pregnant women*.

Yet, in the first 12 week post-vaccine rollout surveillance report submitted by Pfizer to the PFDA, of the 270 pregnancies reported, they followed 32 of them and found a horrifying rate of fetal/neonatal deaths. Again stirs up memories of one of the most historically shocking statements ever uttered by an FDA voting member, my "friend" Eric Rubin, editor-in-chief of my favorite journal, the New England Journal of Medicine (this is a joke), "but we're never going to learn about how safe this vaccine is unless we start giving it." Dr. Rubin and I have a little history. In a NY Times Magazine article which partly profiled me, he was quoted as saying I "got lucky" when I testified in the Senate on the critical need for corticosteroids in hospitalized COVID patients in May of 2020, months before Oxford's trial made it the standard of care overnight.

Well they started giving it all right. Now let's see if there are any data to suggest the vaccines are having an impact on birth rates. Note that although birth rates can vary from year to year, and have small peaks and valleys within the year, you don't typically see large decreases suddenly from one month to the other, in numerous countries around the world. This data is even more horrifying, some of which I obtained from Peter Imanuelson's Substack called the Freedom Corner with Peter Sweden.

In Stockholm during the first quarter of 2022, birth rates plummeted by 14%, shocking a Professor in Demographics:

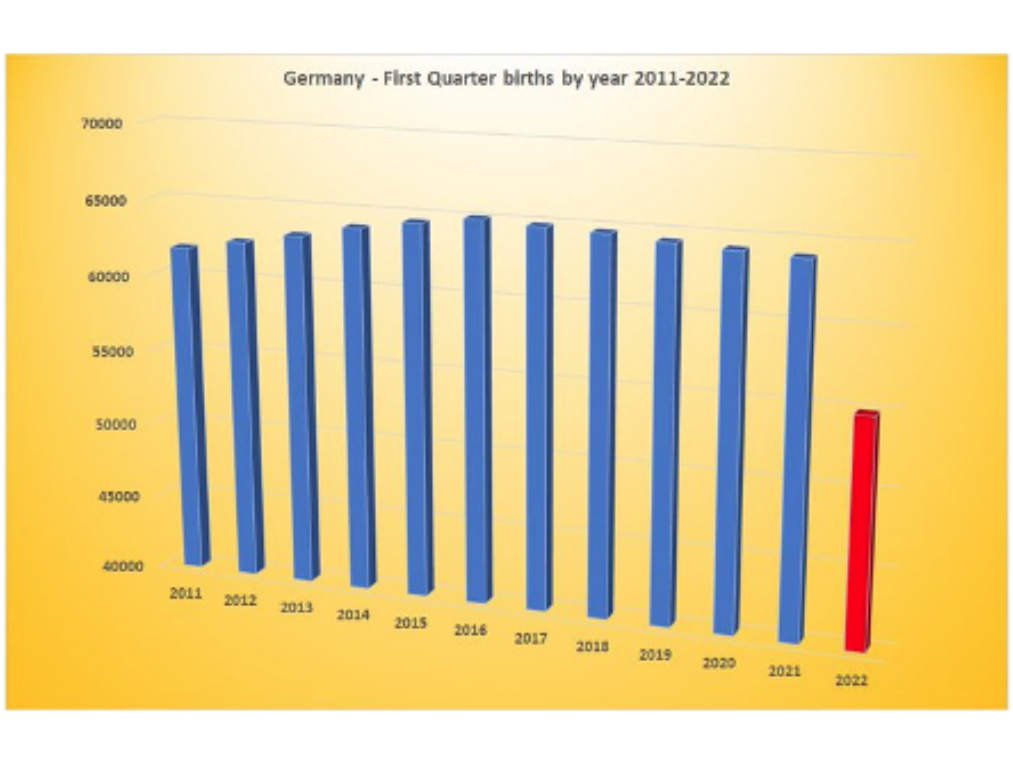
> "It is a drastic and remarkable reduction beyond the usual. We have never seen anything like this before, that the bottom just falls out in just one quarter" said Gunnar Andersson, professor in demographics at Stockholm University to Dagens Nyheter.

As someone who has been witness to massive censorship, much of it voluntary (i.e self-censorship), what the Professor says next is completely expected and in-line with what is now almost two years of many leading (cowardly) scientists, researchers and physicians who have willingly avoided making conclusions that might put the vaccines in a bad light, despite the immensely disturbing data on COVID vaccine toxicity screaming from VAERS, the life insurance industry, and disability statistics since the roll-out. Here is what he says in a newspaper interview:

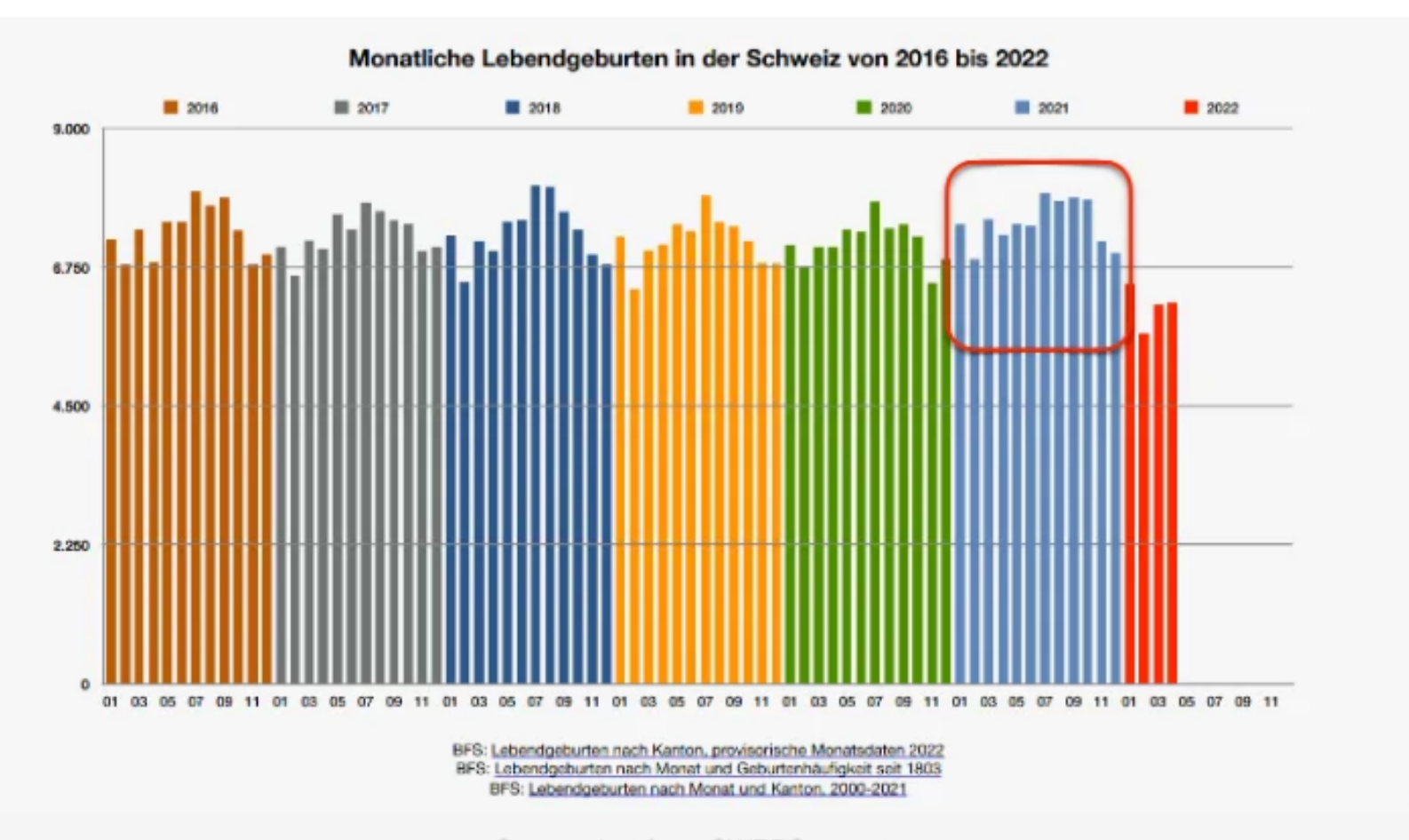
> "It correlates exactly in time with the mass vaccination program in April, May last year. People understood that the lock downs ended and now we had to go out in the world again. Demographists in other parts of Europe see the same timing" the professor said.

His interpretation is that lockdowns ended, vaccines were provided, thus giving everyone the freedom to start newly re-exploring the world instead of making babies? Although I find this almost too absurd to explore, I will say this: Sweden never really had any significant lock-downs. I am so sick and tired of hearing idiotic alternative explanations for truly disturbing data on the vaccines. Things like "anyone can put a report into VAERS", or "working age people died at higher rates because of unemployment and deaths of despair." Yet in 2021, lockdowns were over, unemployment rates were at historic lows, and drug overdoses have been on a fairly constant (but not precipitous) rise for years. I could go on, but you know what I am talking about, the constant explaining away of "inconvenient truths," with my personal favorite (favorite is not the right word), the explosion in articles about Sudden Adult Death Syndrome in trying to explain all the healthy, active young people dropping dead all over the world.

Now check out Germany's first quarter births compared to the first quarter in previous years:



Switzerland data from the Swiss Policy Research Report here:



Screenshot from SWPRS report.

Hungary is down 20% since the vaccine roll-out and this massive decrease was addressed by one member of parliament is this widely circulated video from the RAIR foundation. Other reports are even more shocking: Taiwan is down 27%, UK, North Dakota are reporting 12-13% declines, and Norway 6.2%. Admittedly these are a subset of countries, this is not meant to be a comprehensive analysis globally, but the month to month drop still needs explaining.

Further, disastrous impacts on fertility should not come as a surprise. Although censored, many in my network were aware of massive Facebook groups of women reporting and discussing severe menstrual irregularities as a result of these "vaccines." These groups were shut down by Facebook. Remember, the vaccination campaign had only one enemy: "vaccine hesitancy" and our Federal government paid $1 Billion to media companies to support a favorable view of the vaccines. Massive groups of women reporting severe menstrual irregularities would drive vaccine hesitancy, so such talk must be suppressed at all costs (or minimal cost to Facebook).

We knew about the University of Illinois researchers who were trying to survey 5,000 women to study the effects on menstruation and were besieged with over 30,000 responses in like a day or two. The results were disturbing (and were either explained away as temporary or just ignored).

Google searches find many dozens of articles actually addressing the widespread menstrual irregularities reported by women but always concluding the problems were transient/temporary. But never forget the inaction, ignoring, and suppression of these data by the American College of Obstetrics and Gynecology (ACOG). Never forget the Infectious Disease Society of America's (IDSA) distortion and rejecting of the immense data supporting ivermectin and hydroxychloroquine. Never forget the American Neurological Association and American Heart Associations ignoring of the massive rises in strokes and heart attacks among young healthy people with no co-morbidities. Never forget the Deans of the nations' 126 Academic Medical Centers who had to have been aware of what was happening in their University hospitals, yet said and did nothing. It is an endless list of leaders in Academic Medicine who either were cowardly or willfully complicit in the suppression and ignoring of these data or who simply fell victim to what should have been easily detectable propaganda.

I appreciate the efforts of some who explore alternative "hypotheses" to explain these suddenly dropping birth rates. Fine, prove them. Unless you can, as per the now ignored, but long standing regulatory standard, when a new medicine or device is introduced, you must first assume any adverse effects or deaths reported to be related to the intervention *until proven otherwise*. That is what I am doing here. We must assume the vaccines are impacting fertility unless some other provable or credible explanations for a sudden drop in month to month birth rates. So stop the shots until you can prove they are not (this would be the 189th reason to stop the shots).

Too many young people dying, too many becoming disabled, too many pregnancies resulting in fetal or neonatal death as above, and now we find out that if we continue with this vaccine obsession, they will not be replaced. This is a humanitarian catastrophe heaped atop the one caused by dangerous gain-of-function research. When will the world wake up to this rapidly unfolding horror? For those of us who know what is going on, it is hard not to feel helpless as we are forced to watch increasingly apparent and widespread needless death. But we will continue to try to get these truths out despite the massive censorship and propaganda overwhelming the globe. We have a moral and ethical obligation and take that responsibility seriously no matter what befalls us. Stop the vaccines, now. And if we can't stop them, we must try to convince everyone we know to no longer agree to get vaccinated. Their lives and our future depend on it.

I just want to say how much I appreciate all the subscribers to my Substack, and especially the paid ones! Your support is so greatly appreciated.

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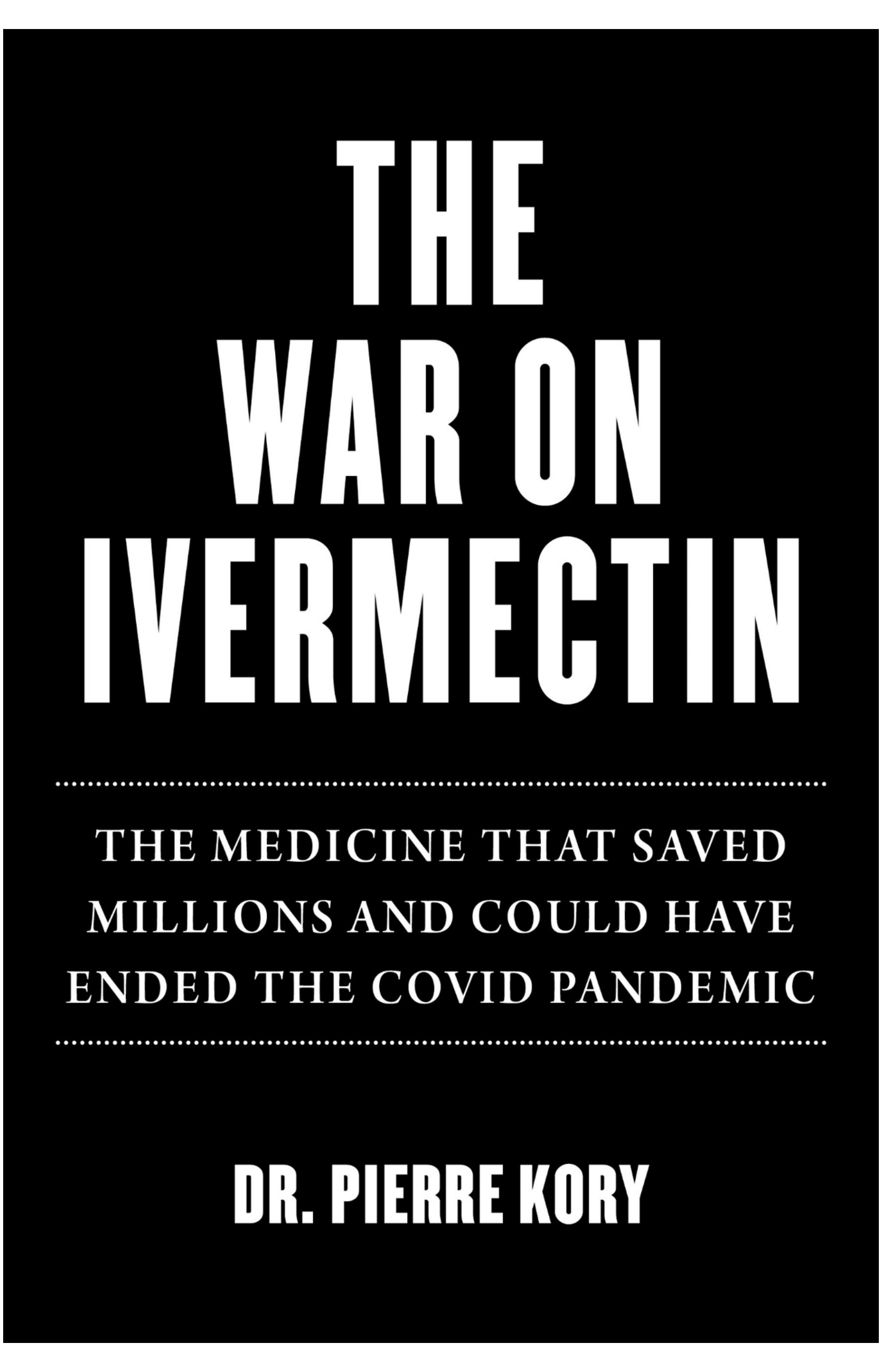
P.S. I opened a tele-health clinic providing care not only in the prevention and treatment of acute COVID, but with a specialized focus on the study and treatment of both Long-Haul and Post-Vaccination injury syndromes. If anyone needs our help, feel free to visit our website at www.drpierrekory.com.

P.P.S. I am getting professional help (hah!) to write a book about what I have personally witnessed and learned during Pharma's historic Disinformation war on ivermectin. Pre-order here for:



THE
WAR ON
IVERMECTIN

THE MEDICINE THAT SAVED
MILLIONS AND COULD HAVE
ENDED THE COVID PANDEMIC

DR. PIERRE KORY

607 likes 607 95

95 Comments

Write a comment...

James A Thorp MD Aug 20

Dr. Kory I am copying a formal communication that I made with the Executive Director of the American Board of obstetrics and gynecology Dr. George Wendel on August 8, 2022. I think that your readers will value from reviewing this detailed letter to the very organization that is pushing the deadly vaccinations in women of reproductive age and in pregnancy. This is absolute insanity given the dark history of the horrible mistakes that obstetricians have made in the past regarding similar such mistakes as in thalidomide, diethylstilbestrol and also the Dalkon Shield. We should learn from our history so it doesn't repeat itself. As Solomon once said there's nothing new under the sun what has been done will be done again.....

Dear Dr. Wendel,

I hope you are well. I am very concerned about the recent email that both you and I were sent from "Torres"? If you have not, I urge you to review it with your counsel and address safety concerns. I have no knowledge of who this Torres is. I CONDEMN his tone, anger and foul language. This is completely inappropriate and does not engender collegial academic discussion of data. While ABOG is well aware of my position on the safety and efficacy of C 19 injections in pregnancy, I never condone this type of behavior, anger and tone.

I hope that you have continued to follow the avalanche of data documenting the proven fact that the C19 injections are NOT safe, NOT effective and NOT necessary. There are now almost 2,000 peer reviewed medical journal publications documenting severe adverse events including death after the C19 injections.

I have completed a study documenting severe adverse outcomes in women of reproductive age and in pregnancy associated with the C19 injections including: an increase in menstrual irregularities, spontaneous abortion, cystic hygroma, fetal malformations, fetal karyotypic

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22 replies

Joseph Carroll Writes Steward Aug 20 Liked by Pierre Kory, MD, MPA

Every pharma company exec & board member that pushed & coerced unsuspecting individuals to take these toxic experimental therapies, along with their cheerleaders in public health, government, big media, big business & education are in clear violation of the Nuremberg Code and need to be brought to justice. They make Dr. Mengele look like an amateur.

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